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April 28, 2006

Ms. Dorcas R. Hardy, Chairman
WHCoA Policy Committee
4350 East West Highway, Third Floor
Bethesda, MD 20814

Dear Ms. Hardy:

Thank you for the opportunity to comment on the recommendations of the 2005 White House Conference on Aging (WHCoA).

Today, Alaska is a young state with a small population. While our numbers are small, the growth of our senior population will have a significant impact on our state and our senior services. Estimates suggest that Alaska's over 60 population will grow from 10.3 percent to 17.1 percent of our population by 2030. The population over age 75 will increase from 2.8 percent to 5.8 percent during the same period.

Prior to the 2005 WHCoA, the Alaska Commission on Aging (ACoA) held meetings throughout Alaska to determine what issues are of concern to Alaska's seniors. We have reviewed the recommendations of the WHCoA and compared them to the issues raised by Alaska's seniors.

Strengthening Medicare and Medicaid are of high concern to Alaskans. Medicare has added a drug benefit and Alaska has assumed the premium and deductible for those with incomes up to 175 percent of the poverty level, under the SeniorCare Program. We applaud the federal recognition of the need for this new benefit.

We are pleased that the WHCoA recognized both the need for more health care professionals and the need to improve the training in geriatric issues. Alaska does not have a medical school. Thus, we depend on a national commitment to improving training in geriatric physicians. We are expanding our nurse and other professional health care education programs at the University of Alaska to include geriatric care in their curriculum. For the past three years, the Geriatric Education Center has developed training for direct service workers that includes a very successful distance education program for rural Alaskans.

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Keeping seniors in non-institutional settings is a critical issue for Alaskans. We have many services targeted to help seniors remain in their communities. We encourage the federal government to continue working with states to provide incentives toward non-institutional care under the Medicaid home and community based programs. These programs not only improve the quality of life of older Americans, cost savings are realized for federal and state governments when institutionalization is delayed.

The WHCoA noted the importance of promoting elder justice and the prevention and prosecution of elder abuse. Alaska's Legislature is considering legislation to address those issues. I expect the legislation will be passed this year. This is an area we take very seriously in Alaska.

Housing is a concern of many seniors. I have appointed work groups to look at affordable housing in Alaska. One group is working on developing housing trusts, the other is working on developing private sector opportunities to increase the supply of affordable housing. We expect reports from both work groups early in the fall.

Improving health status of Alaskans is crucial to a healthy senior population. Our Division of Public Health is staffing a Chronic Disease Policy Academy. They have focused on four priority topics:

1. Reduction of obesity and overweight rates;
 - a. Increase in physical activity,
 - b. Increase in healthy eating,
2. Reduction of tobacco use and substance abuse,
3. Increase use of incentives for individual behavior change, and
4. Improvement in secondary prevention and management of targeted chronic diseases.

These activities over the next few years should help individuals improve their current health status and maintain more healthy life styles.

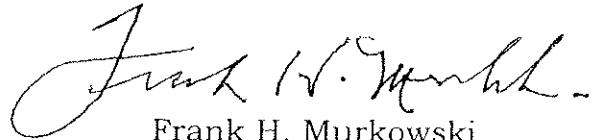
I have enclosed a chart that compares the WHCoA issues to those highlighted by Alaskans during the hearings held by the ACoA.

My administration will continue its work in addressing the needs of senior Alaskans as well as helping Alaskans prepare for their senior years.

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Thank you for considering our comments.

Sincerely yours,



Frank H. Murkowski
Governor

Enclosure

cc: Karleen Jackson, Commissioner, Department of Health and Social Services
Rod Moline, Director, Division of Senior and Disabilities Services
Alaska Commission on Aging
Division of Public Health

Top 50 Resolutions from the 2005 White House Conference on Aging And Related Alaska Resolutions

WHA Resolutions	Alaska Resolutions
1. Reauthorize the Older Americans Act within the first six months following the 2005 White House Conference on Aging.	
2. Develop a coordinated, comprehensive long-term care strategy by supporting public and private sector initiatives that address financing, choice, quality, service delivery, and the paid and unpaid workforce.	
3. Ensure that Older Americans have transportation options to retain their mobility and independence.	The U.S. government shall increase resources for programs to provide medical transportation (rides to doctor visits, medical tests, etc.) for seniors under the Older Americans Act, Title III program. (8)
4. Strengthen and improve the Medicaid program for seniors.	<p>The U.S. government shall ensure that reimbursement rates for the care of people on Medicare and Medicaid are sufficient so as to be commensurate with the actual cost of care. (1)</p> <p>The U.S. government shall update the Medicare and Medicaid programs based on today's economics and health care costs. (21)</p>
5. Strengthen and improve the Medicare program.	<p>The U.S. government shall ensure that reimbursement rates for the care of people on Medicare and Medicaid are sufficient so as to be commensurate with the actual cost of care. (1)</p> <p>The U.S. government shall update the Medicare and Medicaid programs based on today's economics and health care costs. (21)</p>

6.	Support geriatric education and training for all health care professionals, paraprofessionals, health profession students, and direct care workers.	Doctors other than pediatricians shall be encouraged to have a prescribed level of geriatric education as well as continuing education units in aging and palliative care. The U.S. government shall also provide incentives to encourage more physicians and other health care professionals to adopt a geriatric specialty. (5)
7.	Promote innovative models of non-institutional long-term care.	The U.S. government shall expand funding for and provide incentives to states to implement and/or expand consumer-directed care and in-home care programs for seniors, thereby avoiding more costly care in nursing homes. (9)
8.	Improve recognition, assessment, and treatment of mental illness and depression among older Americans.	
9.	Attain adequate numbers of health care personnel in all professions who are skilled, culturally competent, and specialized in geriatrics.	Doctors other than pediatricians shall be encouraged to have a prescribed level of geriatric education as well as continuing education units in aging and palliative care. The U.S. government shall also provide incentives to encourage more physicians and other health care professionals to adopt a geriatric specialty. (5)
10.	Improve state and local based integrated delivery systems to meet 21 st century needs of seniors.	The U.S. government shall study the options for restructuring the United States' health care system to provide for more comprehensive, equal, accessible care for all citizens. This study shall include input from the insurance industry, the pharmaceutical industry, business representatives, medical professionals, and health care consumers. (2)

11.	Establish principles to strengthen Social Security.	<p>The Social Security program shall be preserved as a defined benefit program. No diminished benefit shall be allowed to be paid to any individual qualified to receive a retirement benefit. (14)</p> <p>The U.S. government shall remove the \$90,000 salary cap for Social Security payroll tax deductions. (15) Before any changes are made in the Social Security program, a valid fiscal plan must be developed and made available to the public. The place should reflect accurate, objective information that is easy to understand for the general public. (16)</p>
12.	Promote incentives for older workers to continue working and improve employment training and retraining programs to better serve older workers.	<p>Congress shall consider developing tax credits or other incentives for employers who hire and retain older workers. (18)</p>
13.	Develop a national strategy for supporting informal caregivers of seniors to enable adequate quality and supply of services.	<p>The U.S. government shall provide a tax break for individuals who provide in-home long-term care services for a family member who meets nursing home level of care standards as determined by a medical examination. (4)</p>
14.	Remove barriers to the retention and hiring of older workers, including age discrimination.	
15.	Create a national strategy for promoting elder justice through the prevention and prosecution of elder abuse.	<p>The U.S. government shall increase funding under the Older Americans Act for the Long Term Care Ombudsman program to prevent and treat elder abuse. (24)</p>
16.	Enhance the affordability of housing for older Americans.	<p>The U.S. government shall expand and fund housing programs such as those under HUD (Dept. of Housing and Urban Development) and Rural Development (Dept. of Agriculture) which provide vouchers for low-income seniors and those with special needs. It shall expand and provide increased</p>

		funding for the development of housing programs that integrate housing and in-home services for special needs populations, such as seniors and individuals with disabilities. (28)
17.	Implement a strategy and plan for accountability to sustain the momentum, public visibility, and oversight of the implementation of 2005 White House Conference on Aging resolutions.	
18.	Foster innovations in financing long-term care services to increase options available to consumers.	The U.S. government shall expand funding for and provide incentives to states to implement and/or expand consumer-directed care and in-home care programs for seniors, thereby avoiding more costly care in nursing homes. (9)
19.	Promote the integration of health and aging services to improve access and quality of care for older Americans.	
20.	Encourage community designs to promote livable communities that enable aging in place.	
21.	Improve the health and quality of life of older Americans through disease management and chronic care coordination.	
22.	Promote the importance of nutrition in health promotion and disease prevention and management.	
23.	Improve access to care for older adults living in rural areas.	

24. Provide financial and other economic incentives and policy changes to encourage and facilitate increased retirement savings.	<p>Federal, state and local governments shall develop and require a financial literacy curriculum beginning in elementary school. The federal government shall establish incentives for states that implement financial literacy programs. (17)</p> <p>The U.S. government shall consider additional incentives and changes to the tax code to encourage personal savings accounts, IRAs and other personal investments, and health care savings accounts, without income cap restrictions. (20)</p>
25. Develop a national strategy for promoting new and meaningful volunteer activities and civic engagement for current and future seniors.	<p>The U.S. government shall create a “domestic Peace Corps” of retired medical personnel to work with seniors, helping take some of the burden off doctors. (11)</p> <p>The U.S. government shall create a Civilian Conservation Corps type program for seniors, to utilize the energy, experience, and insight of seniors for community enhancement. (26)</p>
26. Encourage the development of a coordinated federal, state, and local emergency response plan for seniors in the event of public health emergencies or disasters.	
27. Enhance the availability of housing for older Americans.	
28. Reauthorize the National and Community Service Act to expand opportunities for volunteer and civic engagement activities.	<p>The U.S. government shall create a “domestic Peace Corps” of retired medical personnel to work with seniors, helping take some of the burden off doctors. (11)</p> <p>The U.S. government shall create a Civilian Conservation Corps type program for seniors, to utilize the energy, experience, and insight of seniors for community enhancement. (26)</p>

29.	Promote innovative evidence-based and practice-based medical and aging research.	
30.	Modernize the Supplemental Security Income (SSI) program.	
31.	Support older adult caregivers raising their relatives' children.	
32.	Ensure appropriate recognition and care for veterans across all health care settings.	The U.S. government shall keep its promise to veterans to provide them with medical services and hospital care for the rest of their lives. (10)
33.	Encourage redesign of senior centers for broad appeal and community participation.	
34.	Reduce health care disparities among minorities by developing strategies to prevent disease, promote health, and deliver appropriate care and wellness.	Federal and state government and the health insurance industry shall emphasize prevention and wellness programs, including the provision of coverage for preventive care designed to deter or forestall chronic disease. (3)
35.	Educate Americans on end-of-life issues.	
36.	Develop incentives to encourage the expansion of appropriate use of health information technology.	The U.S. government shall require that information about drugs and health issues be presented to consumers simply, honestly, and without slick marketing tactics. (13)
37.	Prevent disease and promote healthier lifestyles through educating providers and consumers on consumer health care.	Federal and state government and the health insurance industry shall emphasize prevention and wellness programs, including the provision of coverage for preventive care designed to deter or forestall chronic disease. (3)
38.	Promote economic development policies that respond to the unique needs of rural seniors.	

39.	Apply evidence-based research to the delivery of health and social services where appropriate.	
40.	Improve health decision-making through promotion of health education, health literacy, and cultural competency.	
41.	Strengthen the Social Security Disability Insurance program.	
42.	Evaluate payment and coordination practices in the geriatric health care continuum to ensure continuity of care.	The U.S. government shall ensure that reimbursement rates for the care of people on Medicare and Medicaid are sufficient so as to be commensurate with the actual cost of care. (1)
43.	Encourage appropriate sharing of health care information across multiple management systems.	
44.	Ensure appropriate care for seniors with disabilities.	The U.S. government shall expand and fund housing programs such as those under HUD (Dept. of Housing and Urban Development) and Rural Development (Dept. of Agriculture) which provide vouchers for low-income seniors and those with special needs. It shall expand and provide increased funding for the development of housing programs that integrate housing and in-home services for special needs populations, such as seniors and individuals with disabilities. (28)
45.	Strengthen law enforcement efforts at the federal, state, and local level to investigate and prosecute cases of elder financial crime.	
46.	Review alignment of government programs that deliver services to older Americans.	
47.	Support older drivers to retain mobility and independence through strategies to continue safe driving.	

48.	Expand opportunities for developing innovative housing designs for seniors' needs.	The U.S. government shall expand and fund housing programs such as those under HUD (Dept. of Housing and Urban Development) and Rural Development (Dept. of Agriculture) which provide vouchers for low-income seniors and those with special needs. It shall expand and provide increased funding for the development of housing programs that integrate housing and in-home services for special needs populations, such as seniors and individuals with disabilities. (28)
49.	Improve patient advocacy to assist patients in and across all care settings.	
50.	Promote enrollment of seniors into the Medicare Prescription Drug program.	The U.S. government should acknowledge consumers' concerns and work together with the pharmaceutical industry to find ways to achieve a reduction in the cost of prescription drugs. (6)

Alaska resolutions with no match in the WHCOA top 50 resolutions:

- (7) The U.S. government shall require simplification of paperwork required by insurance companies and government programs such as Medicare and Medicaid.
- (12) The U.S. government shall enact tort reform or other legislation designed to reduce medical costs by limiting liability.
- (19) The U.S. government shall overhaul federal income tax regulations to make them fairer and less complex.
- (22) The U.S. government shall enforce existing laws and/or expand them to protect corporate and government pensions and retiree health plans.
- (23) The U.S. government shall review the formula used for computing the national poverty level, as current poverty guidelines underestimate the extent of poverty in the U.S. today.
- (24) The U.S. government shall provide reduced-cost education loans for students committing to serve in the professional health care and in-home care direct services fields.
- (27) The U.S. government shall expand the Job Corps and AmeriCorps programs to include vocational training programs to prepare young people for providing seniors services.

